

South Carolina

VENDOR MANUAL



Women, Infants & Children

SOUTH CAROLINA

South Carolina Department of Health and Environmental Control

Table of Contents

About the Program	1
<i>How do the Vendors Fit into the Program</i>	
Competitive Pricing and Peer Groups.....	1-2
DHEC Regional Map	3
Minimum Stocking Requirements.....	4-6
Vendor Price Surveys	7
How to Become a South Carolina WIC Vendor.....	8-10
<i>Application Process</i>	
<i>WIC Vendor Stamp</i>	
Transacting WIC Checks	10-17
<i>WIC Checks</i>	
<i>Accepting WIC Checks</i>	
<i>Cash Value Vouchers</i>	
<i>Accepting Cash Value Vouchers</i>	
<i>WIC ID Cards</i>	
Depositing WIC Checks.....	18-22
<i>Correcting Errors</i>	
<i>Correcting Rejected WIC Checks</i>	
Local Health Departments.....	22-28
Infant Formula Manufacturers	28-29
Vendor Monitoring	30-31
<i>Random / Routine Visits</i>	
<i>Follow-up Visits</i>	
<i>Compliance Investigations</i>	
<i>Inventory Audits</i>	
<i>Vendor Training</i>	
Program Violations and Disqualifications	31-36
<i>Mandatory Sanctions</i>	
Administrative Review Procedures	36-38
<i>Vendor Claims</i>	
<i>WIC Logo Usage</i>	
<i>Vendor Appeals</i>	
<i>Fair Hearing Information</i>	
<i>Complaint Process</i>	

ABOUT THE PROGRAM

WIC is the Special Supplemental Nutrition Program for Women, Infants and Children. WIC provides nutritious foods, nutrition counseling, and referrals to health care and social services. WIC serves low-income pregnant, postpartum, and breastfeeding women, infants and children up to age 5 who are at nutritional risk.

Application for WIC is made at local health departments. Applicants must provide proof of residency (they must live within the state), and documentation of their household income. Applicants' income must fall at or below 185% of the U.S. Poverty Guidelines. In addition, applicants must have a nutritional risk factor defined as abnormal weight gain during pregnancy, history of high risk pregnancies, growth problems, inadequate diet, iron-deficiency anemia, or other similar problems.

Eligible applicants are certified for a defined period of time; a) infants up to one year of age, b) children for a period of six months per certification, c) pregnant women for duration of pregnancy and up to 6 weeks of date of delivery, d) postpartum women until six (6) months after delivery and e) breastfeeding women as long as they are breastfeeding not to exceed one year after birth.

WIC participants receive checks to purchase specific foods each month that are designed to supplement their diets with specific nutrients. Participants obtain the foods by use of the WIC checks in grocery stores that are authorized as a WIC vendor.

The WIC Program has been found to be very effective. The results of numerous federal, state, and local studies conducted both by government and citizen groups point to the positive impact of the WIC Program. Specific findings include an increase in early (first trimester) prenatal care, increased length of gestation, decreased rate of pre-term delivery, significant increases in birth weight, and reduced late fetal deaths. WIC participation was also associated with improved dietary intakes of protein, and other nutrients which often are inadequate in the diets of low-income pregnant women and children.

Vendors play an important role in the WIC Program and are critical to the success of the program. If WIC Check redemption transactions occur according to procedures, participants are best able to realize the full benefit from the program.

COMPETITIVE PRICING AND PEER GROUPS

Federal regulations require State WIC Programs to establish competitive pricing and price limitations during the process of vendor authorization. Competitive pricing considers the prices a vendor charges for supplemental foods as compared to the prices charged by other authorized vendors within the same peer group and geographical area. Price limitations ensure that a vendor applicant has competitive prices and maintains competitive prices as an authorized vendor. Within six (6) months of participation on the program, the vendor must be reassessed to ensure that they have not reached above-50-percent status. After this assessment is completed, if the vendor WIC redemptions exceed their SNAP, additional legal or certified tax documents will be required. The competitive pricing

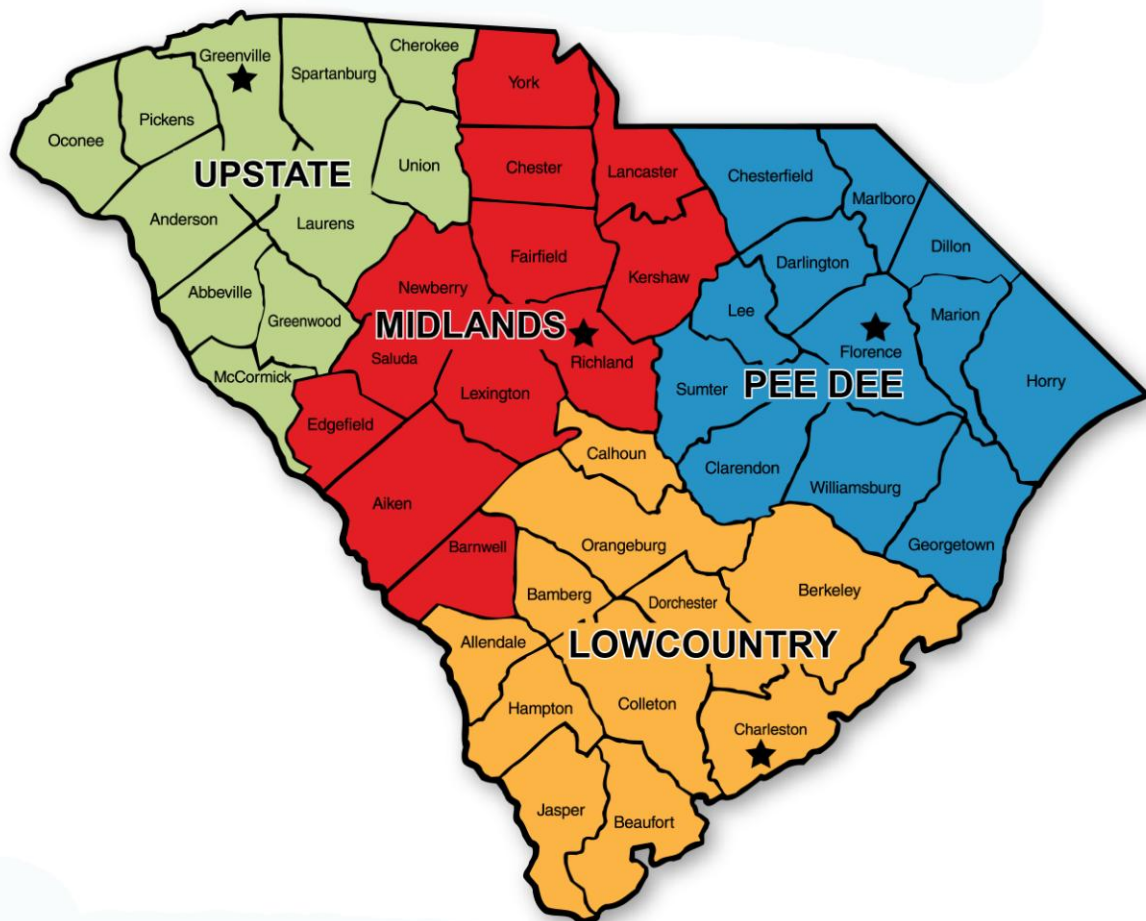
structure for the South Carolina WIC Program establishes five peer groups within the four regions. Each vendor is assigned to one of the established peer group and is informed of their peer group assignment and geographical region at the time of their authorization. The following lists the definitions of each vendor peer group.

Vendor Peer Groups

STORE TYPE	DESCRIPTION	DEFINITION
1	Chain	One of a group of stores owned by a single entity (individual or corporation)
2	Franchise	Owned by an individual but receives stock as part of a group of stores
3	Commissary	Government owned facilities
4	Independent/Convenience	Stores of varying size, which are owned by an individual (or small company) and do not have the buying power of a group, stocking primarily “convenience items.”
5	Pharmacy	<p>Primarily sells products such as medicine, health care items, etc. Pharmacies must make available, upon request, exempt and/or infant formulas (Elecare, Neocate, Peptamen, Phenix, etc.)</p> <p>Pharmacies that are located within a retail establishment, such as a chain store, are not included in this category. Such pharmacies shall be authorized as part of the chain store and will not be authorized independently.</p>

DHEC Regions

As a cost containment measure, vendor prices will be compared with vendors in the same peer group and geographical area. Below is a map of DHEC regions.



SOUTH CAROLINA WIC PROGRAM STOCKING REQUIREMENTS

The vendor must stock the varieties and minimum quantities of WIC approved foods as listed in the current WIC approved food list. **Vendors cannot use another store's brand items as part of the minimum stocking requirements.** Minimum stocking requirements are listed below:

INFANT FORMULA

ITEM:	Gerber Good Start Gentle	<u>12.1 oz. concentrated liquid</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	24 containers
	(4) Independent	24 containers
ITEM:	Gerber Good Start Gentle Supplementing	<u>12.4 oz. powder</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	24 containers
	(4) Independent	12 containers
ITEM:	Gerber Good Start Gentle	<u>12.7 oz. powder</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	24 containers
	(4) Independent	12 containers
ITEM:	Gerber Good Start Soy	<u>12.9 oz. powder</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	12 containers
	(4) Independent	6 containers
ITEM:	Gerber Good Start Soothe	<u>12.4 oz. powder</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	12 containers
	(4) Independent	6 containers

INFANT CEREAL (*Not allowed – added fruit or formula, organic, canister cereals with DHA*)

ITEM:	Beech Nut, Gerber, Home 360 Baby, or Comforts For Baby (Single or mixed grain, no fruit added)	<u>8 oz. box</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	3 varieties, 6 boxes of each
	(4) Independent	2 varieties, 6 boxes of each

INFANT FRUITS & VEGETABLES (*single or mixed ingredients*)

ITEM:	Beech Nut, Gerber, or Goya	<u>4 oz. jar</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	2 varieties of fruits 2 varieties of vegetables Total 96 containers
	(4) Independent	1 variety of fruit 1 variety of vegetable Total 32 containers

INFANT MEATS (*single ingredient*)

ITEM:	Beech Nut, Gerber or Goya	<u>2.5 oz. jar</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	2 varieties, 31 containers
	(4) Independent	1 variety, 16 containers

MILK (lowest cost)		
ITEM:	Reduced Fat (2%), Low Fat (1%), Fat Free (Skim)	
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	4 half-gallon containers (each type) 8 gallon containers (each type)
	(4) Independent	2 half-gallon containers 4 gallon containers (Reduce Fat (2%) and Low Fat (1%) only)
ITEM:	Whole	
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	4 gallon containers 2 half-gallon containers
	(4) Independent	2 half-gallon containers 2 gallon containers
CHEESE (Not allowed: shredded, deli-specialty, cheese food, product, spread, cracker cuts or blends)		
	(Lowest Cost)	<u>1-lb (16 oz.)</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	6 1-lb (16 oz.) sizes
CEREAL		
		<u>12 oz., 18 oz., 36 oz. sizes ONLY</u> (Unless specified size in food guide)
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	6 varieties, 4 boxes each
	(4) Independent	4 varieties, 4 boxes each (This includes 1 variety of whole grain cereal)
JUICE		
ITEM:	100% Unsweetened	<u>64 oz. containers</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	2 varieties, 6 containers each (This includes 1 variety of WIC approved apple juice in 64 oz size)
ITEM:	Frozen Juice	<u>11.5 - 12 oz. containers</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	1 variety, 6 containers each
EGGS (Not allowed: specialty, brown, or organic)		
	Large White Only	<u>1 dozen</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	8 dozens
	(4) Independent	6 dozens

PEANUT BUTTER (Not allowed: added food items, spreads, organic)		
	Smooth or Chunky	<u>16 - 18 oz. container</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	8 jars
DRIED PEAS / BEANS (Not allowed: organic, sweet peas)		
ITEM:	Unflavored single variety beans or peas	<u>1-lb (16 oz.)</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	2 varieties, 8 packages each
	(4) Independent	1 variety, 6 packages each
CANNED MATURE BEANS (Not allowed: organic, canned green beans, canned sweet peas)		
ITEM:	Unflavored single variety beans or peas	<u>15 – 16 oz.</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	24 cans
TUNA (Not allowed: albacore-white tuna)		
ITEM:	Any brand, water or oil packed	<u>5 oz. container</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	15 cans
BREAD		
ITEM:	Whole Grain or Whole Wheat	<u>1-lb (16oz.)</u>
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary	8 loaves
	(4) Independent	4 loaves
FRUITS AND VEGETABLES		
ITEM:	Fresh or Frozen	
	STORE TYPE	MINIMUM QUANTITY
	(1) Chain, (2) Franchise, (3) Commissary, (4) Independent	2 varieties of fruit (4 pounds total) 2 varieties of vegetables (4 pounds total)

VENDOR PRICE SURVEYS

The prices from the Vendor Price Survey are used for comparison among the same types of stores in the same geographical area. Prices must be accurate. WIC authorized vendors are required to complete a shelf price survey at least twice a year, January and July, to ensure compliance with cost containment regulations. South Carolina Vendors can now complete and submit their Vendor Price Survey via the internet. **IT IS VERY IMPORTANT THAT VENDORS COMPLETE THIS SURVEY AS REQUESTED.**

The instructions are below:

Enter <https://scps.wicbanking.com/>

Click “Survey” at the top of the page to start.

1. Enter vendor number twice.
2. Check the appropriate vendor category.
 - Vendor – Vendors that redeem WIC checks.
 - Vendor with Pharmacy – Vendors that redeem WIC checks including checks for special infant formula redeemed through the pharmacy.
 - Pharmacy – Vendors that redeem WIC checks for special infant formulas only.
3. Complete all fields.
4. Click to enter prices.
Column labeled “DI” is for WIC Program Use Only.
5. Print a blank survey by right clicking your mouse and choosing the “Print” option.
6. Print completed price survey for your records once all fields have been completed.
7. Once submitted, you will receive a confirmation that **your survey was successfully submitted.**

HOW TO BECOME A SOUTH CAROLINA WIC VENDOR

To become an authorized vendor, applicants must meet the selection criteria established by USDA and the South Carolina WIC Program. To meet the selection criteria, a vendor applicant must:

- 1) Complete the required WIC Vendor Application, WIC Price Survey, Vendor Agreement, Request for Taxpayer Identification and Certification form (IRS W-9) and register as a vendor through the South Carolina State Government Procurement System Vendor Registration.
- 2) Maintain current shelf prices that do not exceed the maximum price for each food within the vendor applicant's peer group.
- 3) Pass a monitoring review to determine whether the store has the minimum inventory of supplemental foods.
- 4) Ensure that the applicant's employees receive instruction in WIC Program policies, procedures and requirements.
- 5) Maintain all inventories within valid expiration dates.
- 6) Mark the current shelf prices of all WIC supplemental foods.
- 7) Operate the store at a permanent and fixed location.
- 8) Be open for business throughout the year at least six days a week, for at least 40 hours per week, between 8:00 a.m. and 11:00 p.m.
- 9) Purchase infant formula only from state approved supplier(s).
- 10) Have no convictions or civil judgments within the last six years that indicate a lack of business integrity on the part of the current owners, officers, or managers. Such activities include, but are not limited to: fraud, antitrust violations, embezzlement, theft, forgery, bribery, falsification of records, making false statements, receiving stolen property, making false claims, and obstruction of justice.
- 11) Be an authorized Supplemental Nutrition Assistance Program (SNAP) vendor (Pharmacies are exempt from this requirement).
- 12) Not be employed by or have a spouse, child or parent employed by the WIC Program serving the county in which the vendor applicant conducts business. An applicant also shall not have an employee who handles, transacts, deposits, or stores WIC checks who is employed by, or has a spouse, child, or parent who is employed by the WIC Program serving the county in which the vendor applicant conducts business.

- 13) Not provide transportation for participants to and from a vendor's premises, not deliver supplemental foods to participants, or offer promotional incentives directed solely to WIC participants.
- 14) Not apply to the WIC Program if the store has been disqualified from participation in the WIC Program and the disqualification period has not expired.

APPLICATION PROCESS

An applicant must be an authorized SNAP vendor prior to applying for WIC Program vendor authorization. To be eligible to accept WIC checks, food retailers and pharmacies must be authorized by the State WIC Program.

All applicants must complete the following forms: WIC Vendor Application, WIC Price Survey, Vendor Agreement, and an IRS W-9, Request for Taxpayer Identification and Certification form and register as a vendor through the South Carolina State Government Procurement System Vendor Registration.

If a vendor applicant has prices above the maximum allowable price, for its assigned peer group, the WIC Vendor Management Unit notifies the vendor applicant in writing. The vendor applicant is then given an opportunity to submit a revised WIC Price Survey within 30 days. If any of the vendor applicant's resubmitted prices exceed the maximum allowable price or the vendor does not resubmit prices within 30 days, the application is denied in writing. If at any time the applicant's application is denied, the applicant must wait 180 days from the date of the written denial to reapply.

The WIC Vendor Management Unit conducts a preapproval visit to the store to determine if the applicant's store meets WIC vendor selection requirements. A key requirement is that the store carries the minimum inventory of WIC foods. **Vendors/applicant cannot use another store's brand items as part of the minimum stocking requirements.** If a vendor applicant fails the first visit, the WIC Program staff revisits within 30 days. However, vendor applicants failing a second time cannot reapply for a period of 180 days from the date of the second preapproval visit.

During a pre-approval visit, Vendor Management Staff:

- Meets with store manager/owner to discuss all items listed on the Pre-approval Visit Form.
- Reviews the stock to ensure that minimum stocking requirements are met.
- Reviews invoices to ensure that formula were purchased from an approve wholesaler, distributor, and/or manufacturer.
- Checks prices to see if vendor prices are consistent with vendor price survey which was approved.
- Verifies that WIC items are not the majority of the vendor's inventory.
- Allows the vendor to ask any questions concerning the Program.
- Obtains vendor's signature on two copies of the Vendor Agreement and the Pre-approval Visit Form.

- Give the vendor a vendor resource packet. (Vendor Manual, Step-By-Step, We Accept WIC Poster, Please Separate Grocery WIC Approve Labels and Materials Order Form)

A vendor applicant cannot accept WIC checks prior to authorization. **The WIC Vendor Management Unit will mail a vendor stamp with a uniquely assigned 5-digit number to the vendor within two (2) weeks of being authorized.**

THE WIC VENDOR STAMP

The WIC stamp shows that the store is authorized to accept WIC checks. Each WIC check accepted must be stamped clearly prior to deposit. WIC checks deposited without a vendor stamp or an illegible vendor stamp will be rejected. **If at any time the store ceases to be authorized, the State agency requires that the stamp be returned.** The WIC Vendor Stamp issued only by the WIC Program can be used. If a new stamp is needed, please notify the WIC Vendor Management Unit.

SAMPLE WIC VENDOR STAMP



GUIDELINES FOR TRANSACTING WIC CHECKS

The South Carolina WIC Program issues two types of negotiable WIC checks; the computer generated check and the manual check. The vendor deposits the WIC check into their local retail bank. WIC checks accepted outside the valid period (“Not Valid Before” or “Void After” dates) cannot be approved for payment. **The WIC check will be accepted by the vendor using the transaction steps described under “Accepting the WIC Check”.**

A transaction is the process by which a WIC participant presents a WIC check along with the WIC ID card to a vendor to exchange for supplemental food allowed by the WIC Program.

The key to proper WIC transactions is to ensure that all store personnel strictly follow procedures when accepting WIC checks. If proper procedures are not followed, WIC checks will be rejected.

Authorized WIC vendors must offer WIC customers the same courtesies offered to other customers. Examples include accepting discount and manufacturer’s coupons and “valued customer” cards, and not creating separate checkout lines for WIC customers.

Listed below are the types of WIC checks:

- 1) The WIC Check (with prescribed foods). (See sample check)
 - These checks have the following information printed or handwritten on them:
 - 1) The check number and stub area
 - 2) The participant's name
 - 3) The participant's ID number
 - 4) The prescribed food items
 - 5) The "Not Valid Before" date
 - 6) The "Void After" date
 - 7) The "Signature of Recipient" line
 - 8) The "5-digit Vendor (#) Stamp" area
 - 9) The "Location of the county and clinic code"
 - 10) Magnetic Ink Character Recognition or MICR (often pronounced micker)

SAMPLE BLUE COMPUTER CHECK

04003932		CLINIC NUMBER 0000004002		PATIENT NUMBER 5550650895		PATIENT NAME SPAULDIN, MONICA		04003932	
NOT VALID BEFORE 04/01/2014		QTY		DESCRIPTION		WIC PROGRAM SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL		NOT VALID BEFORE 04/01/2014	
DATE REDEEMED / /		001 16 - 18oz		PEANUT BUTTER				DATE REDEEMED / /	
VOID AFTER 04/30/2014		001 1 LB		BAG OF BEANS/PEAS				VOID AFTER 04/30/2014	
PURCHASE AMOUNT DOLLARS CENTS		003 1 1/2 GALLON		WIC APPROVED SOY MILK				PURCHASE AMOUNT DOLLARS CENTS	
MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE		003 11.5-12 OZ		FROZEN JUICE OR 48 OZ JUICE				MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE	
DHEC 1864 REV. 98		NOT TO BE SIGNED UNTIL DATE REDEEMED AND PURCHASE AMOUNT HAVE BEEN ENTERED BY VENDOR		WARNING: THE BACKGROUND ON THE PURCHASE AMOUNT AND "VOID AFTER" DATE MUST BE DEPOSITED IN PINK THERMOGRAPHIC INK. THE PINK BACKGROUND SHOULD BE PRESENT WHEN HEAT IS APPLIED AND REAPPEAR WHEN HEAT IS REMOVED		SIGNATURE OF RECIPIENT		0000004002	
10		MICR: ⑈04003932⑈ ⑈06119684⑈ 2502193⑈						9	

SAMPLE GREEN MANUAL CHECK

9280088		COUNTY 40		PATIENT NUMBER 5550650895		PATIENT NAME Spauldin, Monica		9280088	
WIC MANUAL FOOD		PLEASE PRINT		ISSUED BY:		WIC Program SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL		NOT VALID BEFORE 04/01/2014	
NOT VALID BEFORE 04/01/2014		UNIT		DESCRIPTION				DATE REDEEMED / /	
DATE REDEEMED / /		16 Ounces		WIC Approved Cereal				VOID AFTER 04/30/2014	
VOID AFTER 04/30/2014		1 Gallon		12oz Lowfat Milk or Fatfree Milk				PURCHASE AMOUNT DOLLARS CENTS	
PURCHASE AMOUNT DOLLARS CENTS		2 1 LB		Bag of Beans/Peas				MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE	
MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE		11.5-12 OZ		FROZEN JUICE OR 48 OZ JUICE				NOT VALID WITHOUT OFFICIAL WIC VENDOR STAMP HERE	
DHEC 1865 REV. 97		VALID ONLY FOR QUANTITIES AND SIZES OF ITEMS LISTED ABOVE		NOT TO BE SIGNED UNTIL DATE REDEEMED AND PURCHASE AMOUNT HAVE BEEN ENTERED BY VENDOR		SIGNATURE OF RECIPIENT		RICHLAND WIC 40-02	
10		MICR: ⑈9280088⑈ ⑈06119684⑈ 2502193⑈						9	

ACCEPTING THE WIC CHECK

The following steps must be followed when redeeming all WIC checks.

- 1) Identify the WIC order.
- 2) Ask for the **WIC ID card and WIC check(s)**. Hold the ID card until the end of transaction to compare signatures. If the participant does not have a signed ID card, do not begin the transaction.
- 3) Make sure that the date redeemed is on or after the “**Not Valid Before**” date and on or before the “**Void After**” date. Also, for a manual check, ensure that the WIC Program stamp is present. The WIC Program stamp is placed on all manually written checks when issued to the participant.
- 4) Make sure that:
 - a) The foods or formulas purchased **are the foods or formula authorized** on the WIC check. (Refer to the current WIC Food Guide)
 - b) The **quantity is correct** as indicated on the WIC check.
 - c) The foods or formula are in the **correct container size** (e.g., milk must be given in gallon, half gallon and quart containers as indicated on the WIC check). A participant may choose to purchase less food than prescribed on the WIC check.
- 5) Enter the price into the register for each item as any other purchase. **Do not charge sales tax**. If the register automatically adds sales tax, deduct the sales tax before entering the total purchase amount on the WIC check.
- 6) **Write the purchase amount and the purchase date** in ink (blue or black) on the stub of the WIC check. Enter the same amount on the WIC check.
- 7) **Obtain the signature** of the person presenting the WIC check and compare the signature on the WIC ID card with the signature on the WIC check. If the signatures do not match, do not complete the transaction.
- 8) Attach the register receipt to the WIC check stub and maintained for records. Receipts and stubs should be kept in the store for at least six (6) months.
- 9) Authorized pharmacies can only accept WIC checks for exempt formula and WIC medical foods.

THE CASH VALUE VOUCHER

The WIC Program provides participants with a cash value voucher (CVV) to purchase fresh or frozen fruits and vegetables at authorized grocery stores or authorized local farmers' markets. Vouchers are distributed to participants along with the other WIC checks. CVV's are issued monthly in increments of \$6.00 for children, \$10.00 for pregnant or partially breastfeeding women and \$10.00 for fully breastfeeding women. On rare occasions, cash value vouchers for \$15.00 may be issued. No change can be given to the participant. The cash value voucher may be in the form of a blue computer voucher or a green manual voucher. **The WIC cash value voucher will be accepted by the vendor using the transaction steps described under "Accepting the Cash Value Voucher".**

FRUITS AND VEGETABLE FACTS	
• Any variety of fresh whole or cut vegetables without added sugars, fats, or oils.	
• NO WHITE POTATOES ARE ALLOWED (yams and sweet potatoes are allowed).	
• Any variety of frozen vegetables (NO WHITE POTATOES) without added sugars, fats, sauces, seasonings, or oils.	
• Any variety of frozen fruits without added sugars.	
• Any variety of fresh whole or cut fruits without added sugars.	
• No <u>canned</u> or <u>dried</u> fruits or vegetables.	
• No jars, vegetables/fruit trays, or baskets.	
• No prepackaged salad kits with dressing, croutons, etc.	
• Organic is allowed.	
• No Nuts or Peanuts	

2) The Cash Value Voucher (fresh or frozen fruits and vegetables). (See sample vouchers)

• These vouchers have the following information printed or handwritten on them:

- 1) The check number
- 2) The participant's name
- 3) The participant's ID number
- 4) The "Not Valid Before" date
- 5) The "Void After" date
- 6) The denomination of \$6, \$10, or \$15
- 7) The "Signature of Recipient" line
- 8) The "5-digit Vendor (#) Stamp" area
- 9) The "Location of the county and clinic code"
- 10) Magnetic Ink Character Recognition or MICR (often pronounced micker).

SAMPLE BLUE COMPUTER CASH VALUE VOUCHER

04003933 NOT VALID BEFORE 04/01/2014 DATE REDEEMED / / VOID AFTER 04/30/2014 PURCHASE AMOUNT DOLLARS CENTS _____ MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE. DHEC 1864 REV. 98	<div style="display: flex; justify-content: space-between;"> 0000004002 5550650895 SPAULDIN, MONICA </div> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>QTY</th> <th>DESCRIPTION</th> </tr> </thead> <tbody> <tr> <td>001</td> <td>CASH VALUE VOUCHER - \$10.00</td> </tr> <tr> <td>001</td> <td>NO CHANGE IS TO BE ISSUED</td> </tr> <tr> <td>001</td> <td>FRESH OR FROZEN FRUITS AND/OR VEGETABLES</td> </tr> </tbody> </table> <p style="text-align: center; font-weight: bold; font-size: 1.2em;">MAX: \$10.00</p> <p style="text-align: center;">SIGNATURE OF RECIPIENT _____</p>	QTY	DESCRIPTION	001	CASH VALUE VOUCHER - \$10.00	001	NO CHANGE IS TO BE ISSUED	001	FRESH OR FROZEN FRUITS AND/OR VEGETABLES	04003933 NATIONAL BANK of SC COLUMBIA, SC Payable through SOUTHERN NATIONAL MARIETTA, GEORGIA NOT VALID BEFORE 04/01/2014 DATE REDEEMED / / VOID AFTER 04/30/2014 PURCHASE AMOUNT DOLLARS CENTS _____ MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE
QTY	DESCRIPTION									
001	CASH VALUE VOUCHER - \$10.00									
001	NO CHANGE IS TO BE ISSUED									
001	FRESH OR FROZEN FRUITS AND/OR VEGETABLES									

040039335
061119684
2502193

SAMPLE GREEN MANUAL CASH VALUE VOUCHER

9289370 WIC MANUAL FOOD NOT VALID BEFORE 11/01/2011 DATE REDEEMED / / VOID AFTER 11/30/2011 PURCHASE AMOUNT DOLLARS CENTS _____ MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE DHEC 1865 REV. 97	<div style="display: flex; justify-content: space-between;"> 40 02 5550650895 SPAULDIN, MONICA </div> <p>PLEASE PRINT ISSUED BY: COURTNEY SMITH</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>QTY</th> <th>UNIT</th> <th>DESCRIPTION</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>Cash Value Voucher</td> </tr> <tr> <td></td> <td></td> <td>\$6.00 (Six Dollars)</td> </tr> <tr> <td></td> <td></td> <td>FRESH OR FROZEN FRUITS AND</td> </tr> <tr> <td></td> <td></td> <td>VEGETABLES ONLY</td> </tr> <tr> <td></td> <td></td> <td>NO CHANGE ISSUED</td> </tr> <tr> <td></td> <td></td> <td>END OF PACKAGE</td> </tr> </tbody> </table> <p style="text-align: center; font-weight: bold; font-size: 1.2em;">VOID</p> <p style="text-align: center;">SIGNATURE OF RECIPIENT _____</p>	QTY	UNIT	DESCRIPTION			Cash Value Voucher			\$6.00 (Six Dollars)			FRESH OR FROZEN FRUITS AND			VEGETABLES ONLY			NO CHANGE ISSUED			END OF PACKAGE	9289370 NATIONAL BANK of SC COLUMBIA, SC Payable through SOUTHERN NATIONAL MARIETTA, GA NOT VALID BEFORE 11/01/2011 DATE REDEEMED / / VOID AFTER 11/30/2011 PURCHASE AMOUNT DOLLARS CENTS _____ MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE
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ACCEPTING THE CASH VALUE VOUCHER FOR FRUITS AND VEGETABLES

The following steps must be followed when redeeming a Cash Value Voucher.

1. Ask for the **WIC ID card and voucher(s)**. Hold the ID card until the end of transaction to compare signatures. If the participant does not have a signed ID card, do not begin the transaction.
2. Make sure that the date redeemed is on or after the “**Not Valid Before**” date and on or before the “**Void After**” date. Also for a manual voucher, ensure that the WIC Program Stamp is present.
3. Observe the maximum cash value amount printed on the CVV. The participant can purchase up to that cash value amount. Enter the exact purchase amount up to the maximum value printed on the check. No change is to be given.
4. Enter into the register the cost purchased for each item. **Do not charge sales tax**. If the register automatically adds sales tax, deduct the sales tax amount before entering the total purchase amount on the voucher.
5. **Write the purchase amount up to the maximum value and the purchase date in ink** (blue or black) on the stub of the cash value voucher. Enter the same on the Cash Value Voucher. If the purchase amount exceeds the maximum value, the participant must pay the difference. The participant cannot use two cash value vouchers for one purchase. Each cash value voucher must be a separate transaction.
6. **Obtain the signature** of the person presenting the cash value voucher and compare the signature on the WIC ID card with the signature on the voucher. If the signatures do not match, do not complete the transaction.
7. Attach the register receipt to the cash value voucher stub. Receipts and stubs should be kept in the store for at least six (6) months.

If the WIC participant wants to pay the difference (overage):

1. Complete the WIC transaction.
2. Ring up the overage.
3. Add sales tax to the overage amount, if applicable.
4. Collect the difference with any other form of payment.

NOTE: Participants can use cash, credit/debit card, SNAP, or a personal check to complete the sales transaction.

THE WIC ID CARD

The WIC ID Card is given to participants at the health department. The card lists the individuals eligible to receive WIC foods and the designated individuals who are allowed to do the shopping.

It is required that this card be given to the cashier prior to the beginning of any WIC transaction. The signatures of the individuals authorized to redeem the WIC checks should be on the card.

SAMPLE WIC SIGNATURE ID CARD

South Carolina

Women, Infants & Children

**PROGRAM
ID CARD**

Remember to bring or send this ID card/voucher holder when picking up vouchers. The following person(s) is eligible to receive WIC foods.

Name:	ID#
Alexander Spauldin	5550650895
Alex Spauldin	5550271325

Monica Spauldin
Signature of participant or parent/caretaker

In their absence:

Alex James
Proxy signature
Alex James
Print name of proxy

Proxy Signature

Print name of proxy

Only the persons with signatures on this ID card can cash vouchers at the grocery store.

WIC

www.scdhec.gov/wic

IMPORTANT POINTS TO REMEMBER WHEN ACCEPTING WIC CHECKS

1. The person redeeming the WIC check must get only what is listed on the WIC check. If the customer insists that changes or substitutions are made, please tell them to go to the Health Department to correct the problem.
2. The WIC customer may purchase all the items listed on the WIC check; however, the WIC customer may choose to get less. **DO NOT ISSUE RAIN CHECKS** (i.e., slips stating that you owe the WIC customer additional food or formula). The vendor cannot issue rain checks for food items not available at the time of purchase.
3. If promotional specials are available (i.e. buy one, get one free), these specials must be given to WIC customers. Cents-off store coupons and/or customer loyalty cards must be accepted to reduce the cost of WIC items. **Remember to show WIC customers the same courtesies as other customers.**
4. Complete all information on the WIC check **prior** to obtaining the signature. The participant should sign the WIC check **after** the date and amount have been entered on the WIC check. The participant is a witness to the date and purchase amount entered onto the check. Do not leave the purchase amount or the date redeemed blank to be filled out by office staff or personnel at a later time.
5. For the store's records, staple the register receipt to the WIC check stub and keep on file for at least six (6) months. **(DO NOT STAPLE ANYTHING TO THE WIC CHECK)**
6. Do not knowingly give exchanges for foods or formula purchased with WIC checks, (except for items that are defective, spoiled or exceed their sell/use date and only for the exact same brand and size of item).
7. Do not accept WIC check(s) that have been altered, damaged or pre-signed.
8. Do not require a special lane or area of the store for WIC purchases. **Do not request additional identification other than the WIC ID card.**
9. WIC checks accepted outside the valid period "Not Valid Before" or "Void After" date will not be approved for payment.
10. All WIC checks or cash value vouchers issued in South Carolina can be transacted at any WIC authorized vendor within the state. WIC checks accepted from other states will not be paid.

PREPARING WIC CHECKS FOR DEPOSIT

Follow the steps below to avoid having WIC checks rejected.

1. Review each WIC check to make sure that each section is completed.
2. Correct any errors prior to depositing. Do not staple anything to the WIC checks or use correction fluid on the WIC checks.
3. Stamp the WIC check with the state issued WIC vendor stamp.
4. Make sure that the WIC Program stamp is present on the check.
5. Tear off the stubs (with receipts) and retain for six (6) months.
6. Deposit WIC checks into your local retail bank in accordance with your banking procedures. WIC checks must be deposited into the vendor's bank within sixty (60) days from the "Not Valid Before" date to be considered for payment.

Completed check ready for deposit

04003931 NOT VALID BEFORE 04/01/2014 DATE REDEEMED 4/9/14 VOID AFTER 04/30/2014 PURCHASE AMOUNT DOLLARS CENTS 10.98 <small>MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE.</small> DHEC 1864 REV. 98	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">CLINIC NUMBER</th> <th style="text-align: left;">PATIENT NUMBER</th> <th style="text-align: left;">CHECK NUMBER</th> </tr> <tr> <td>0000004002</td> <td>5550650895</td> <td>SPAULDIN, MONICA</td> </tr> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">QTY</th> <th style="text-align: left;">DESCRIPTION</th> </tr> <tr> <td>004</td> <td>1/2 GALLON WIC APPROVED SOY MILK</td> </tr> </table> <p style="font-size: small;">VALID ONLY FOR QUANTITIES AND SIZES OF ITEMS LISTED BELOW</p> <p style="font-size: small;">NOT TO BE SIGNED UNTIL DATE REDEEMED AND PURCHASE AMOUNT HAVE BEEN ENTERED BY VENDOR.</p> <p style="font-size: small;">*WARNING* THE BACKGROUND ON THE "PURCHASE AMOUNT BOX" AND "PATIENT NAME BOX" HAVE BEEN PRINTED IN PINK TYPE/INK. THE PINK BACKGROUND SHOULD DISAPPEAR WHEN HEAT IS APPLIED AND RE-APPLIED.</p> <p style="font-size: small;">THE BACKGROUND ON THE "PURCHASE AMOUNT BOX" AND "PATIENT NAME BOX" HAVE BEEN PRINTED IN PINK TYPE/INK. THE PINK BACKGROUND SHOULD DISAPPEAR WHEN HEAT IS APPLIED AND RE-APPLIED.</p> <p style="font-size: small;">CHECK IS PRINTED ON SECURITY PAPER. IT CONTAINS COLORED FIBERS AND A TRUE WATERMARK.</p>	CLINIC NUMBER	PATIENT NUMBER	CHECK NUMBER	0000004002	5550650895	SPAULDIN, MONICA	QTY	DESCRIPTION	004	1/2 GALLON WIC APPROVED SOY MILK	04003931 NATIONAL BANK of SC COLUMBIA, SC Payable through SOUTHERN NATIONAL MARIETTA, GEORGIA NOT VALID BEFORE 04/01/2014 DATE REDEEMED 4/9/14 VOID AFTER 04/30/2014 PURCHASE AMOUNT DOLLARS CENTS 10.98 MUST BE DEPOSITED WITHIN 60 DAYS OF NOT VALID BEFORE DATE.
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QTY	DESCRIPTION											
004	1/2 GALLON WIC APPROVED SOY MILK											

SIGNATURE OF RECIPIENT

SC VENDOR
48538

CORRECTING ERRORS

If an error is made when **completing the WIC check**, follow these steps:

1. Draw a **single line** through the incorrect purchase amount or incorrect dates (do not **write over**, erase, scratch through, or use correction fluid).
2. Write the correct amount in the area below purchase price and the correct date above the date.
3. Correct the stub in the same manner.
4. WIC checks taken outside the valid period "Not Valid Before" or "Void After" date will not be approved for payment.

Correcting errors on a WIC check

04003931	<table border="1" style="width: 100%;"> <tr> <td style="width: 33%;">CLINIC NUMBER 0000004002</td> <td style="width: 33%;">PATIENT NUMBER 5550650895</td> <td style="width: 34%;">PATIENT NAME SPAULDIN, MONICA</td> </tr> </table>	CLINIC NUMBER 0000004002	PATIENT NUMBER 5550650895	PATIENT NAME SPAULDIN, MONICA	04003931 <small>NATIONAL BANK of SC COLUMBIA, SC Payable through SOUTHERN NATIONAL MARIETTA, GEORGIA</small>		
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⑈04003931⑈ ⑈061119684⑈ 2502193⑈							

REASONS WIC CHECKS ARE REJECTED

If WIC checks are **returned from the bank** for the following reasons, follow the procedures below:

1. Missing or Illegible Vendor Stamp

- a. Stamp with state authorized WIC Vendor Stamp.
- b. Redeposit into your bank within sixty (60) days from the “Not Valid Before” date.

2. Local Agency Stamp Missing (Manual checks only)

- a. The check should be taken to the local health department. The health department staff will verify that it is a valid check and stamp the check with the agency stamp.
- b. Send check and the register receipt to WIC Vendor Management Unit for approval within sixty (60) days from the “Not Valid Before” date.

3. Altered Date or Amount

- a. Draw a single line through the date or amount (do not **write over**, erase, scratch through, or use correction fluid).
- b. Write the correct date directly above the “Not Valid Before” date or the correct amount below the “Purchase Amount” area on the WIC check.
- c. Send check and the register receipt to the WIC Vendor Management Unit for approval within sixty (60) days from the “Not Valid Before” date.
- d. Once the check is returned from the WIC Vendor Management Unit with a WIC approved stamp, redeposit into your bank within ten (10) business days from receipt of the letter.

4. Missing Date or Missing Amount

- a. Enter missing date or missing amount.
- b. Send check and the register receipt to the WIC Vendor Management Unit for approval within sixty (60) days from the “Not Valid Before” date.
- c. Once the check is returned from the WIC Vendor Management Unit with a WIC approved stamp, redeposit into your bank within ten (10) business days from receipt of the letter.

5. Over Maximum Dollar Amount

- a. Draw a single line through the purchase amount (do not **write over**, erase, scratch through, or use correction fluid).
- b. Write the correct purchase amount directly below the “Purchase Amount” area on the WIC check.
- c. Send check and the register receipt to the WIC Vendor Management Unit for approval within sixty (60) days from the “Not Valid Before” date.
- d. Once the check is returned from the WIC Vendor Management Unit with a WIC approved stamp, redeposit into your bank within ten (10) business days from receipt of the letter.

6. Missing Signature

- a. Deposit the check into your local bank within thirty (30) days from the “Void After” date.
- b. After receiving the rejected check back from the bank for missing signature, call the health department to contact the participant to come in and sign the check (note name of the person you spoke with). (See list of SC WIC clinic codes)
- c. Once the WIC check is signed by the participant, send the check along with the register receipt to the WIC Vendor Management Unit within ninety (90) days from the “Void After” date for approval of payment.
- d. Once the check is returned from the WIC Vendor Management Unit with a WIC approved stamp, redeposit into your bank within ten (10) business days from receipt of the letter.
- e. If the participant does not sign the check prior to ninety (90) days from the “Void After” date, the check will not be paid. **It is the cashier’s responsibility to ensure that the signature is obtained at the time of purchase.**

7. Encoding Error

- a. Checks that are encoded incorrectly on the MICR line by the Bank of First Deposit.
- b. The checks should be returned to the Bank of First Deposit and they will correct the error. The check should then be re-deposited into your account.
- c. These checks should not be sent to the WIC Vendor Management Unit for approval.

8. Deposited Late or Stale Dated

- a. WIC Check(s) deposited more than sixty (60) days after the “Not Valid Before” date. These checks will not be paid and are considered as **Stale Dated**.

If a check is rejected for any reason, (alter date/amount, missing date/amount, missing vendor stamp) make the necessary corrections (see correcting errors) and send to the WIC Vendor Management Unit for processing.

Checks received into the Vendor Management Unit more than forty five (45) days after the “Void After” date will not be paid. All rejected WIC checks along with register receipts should be submitted for approval to:

**S.C. Department of Health and Environmental Control
WIC Vendor Management Unit
Box 101106
Columbia, SC 29211

(1-800-922-4406)**

WIC CLINIC SITES

The WIC Program is federally funded through the United States Department of Agriculture (USDA) to assist states in safeguarding the health and nutritional well-being of our low income women, infants, and children during critical growth periods. The Department of Health and Environmental Control (DHEC) has been designated to administer the WIC Program in South Carolina.

WIC Checks are distributed to participants by local WIC staff at the local health department. Each health department is assigned a four-digit county and clinic number. This number is the last four digits of the number printed on the upper left hand corner and lower right hand corner of the WIC check.

The following is a listing of WIC clinic sites, addresses and telephone numbers. Please contact the appropriate WIC clinic to obtain the signature of participants who failed to sign their WIC checks.

COUNTY	CLINIC	WIC SITE/ADDRESS	TELEPHONE
01	01	Abbeville County Health Department PO Box 189 905 W. Greenwood St., Hwy 72 Abbeville, SC 29620	(864) 366-2131
02	01	Aiken County Health Department 222 Beaufort Street Aiken, SC 29801	(803) 642-1686
03	01	Allendale County Health Department 571 N. Memorial Avenue Allendale, SC 29810	(803) 584-3818
04	11	Anderson County Health Department 220 McGee Rd. Anderson, SC 29625	(864) 260-5637
04	33	Westside Community Center 1100 West Franklin Street Anderson, SC 29624	(864) 260-1093
05	01	Bamberg County Health Department 370 Long Branch Rd. Bamberg, SC 29003	(803) 245-5176
06	01	Barnwell County Health Department 11015 Ellenton St., Hwy 278 Barnwell, SC 29812	(803) 541-1061
07	01	Beaufort County Health Department 601 Wilmington St. Beaufort, SC 29902	(803) 525-7625 Auto Voice System
07	02	Bluffton Health Center 4819 Bluffton Parkway PO Box 235 Bluffton, SC 29910	(843) 757-2251 Auto Voice System
08	01	Berkeley County Health Clinic 109 W. Main St. Moncks Corner, SC 29461	(843) 719-4600
08	05	Goose Creek Health Department 106 Westview Blvd Goose Creek, SC 29445	(843) 572-3313
09	01	Calhoun County Health Department 2837 Old Belleville Rd. St. Matthews, SC 29135	(803) 874-2037
10	12	North Area Health Clinic 3963 Whipper Barony Lane Charleston Heights, SC 29405	(843) 740-1580
10	15	Mt. Pleasant Health Clinic 1189 Sweetgrass Basket Parkway # 100 Mt. Pleasant, SC 29464	(843) 856-1212

COUNTY	CLINIC	WIC SITE/ADDRESS	TELEPHONE
10	27	Northwoods Health Clinic 2070 Northbrook Blvd. A-20 N. Charleston, SC 29406	(843) 953-4300 Auto Voice System
11	01	Cherokee County Health Department 400 S. Logan St. / PO Box 338 Gaffney, SC 29341	(843) 487-2701
12	01	Chester County Health Department 129 Wylie St. PO Box 724 Chester, SC 29706	(803) 385-6152 Auto Voice System
13	01	Chesterfield County Health Department 203 N. Page Street PO Box 112, Chesterfield, SC 29709	(843) 623-2425
14	01	Clarendon County Health Department 110 E. Boyce Street PO Box 729 Manning, SC 29102	(803) 435-8168 (803) 435-8178
15	01	Colleton County Health Department PO Box 229 219 S. Lemacks St. Walterboro, SC 29488	(843) 542-2584
16	05	Darlington County Health Department 305 Russell St. Darlington, SC 29532	(843) 398-4400
16	06	Hartsville Health Department 130 E. Camden Ave PO Box 68 Hartsville, SC 29550	(843) 332-7303
17	08	Dillon County Health Department 201 W. Hampton Street PO Box 1064 Dillon, SC 29536	(843) 774-5611
18	32	Dorchester County Health Department 500 N. Main Street, Box 9 Summerville, SC 29824	(843) 832-0041
19	01	Edgefield County Health Department 21 Star Rd. Edgefield, SC 29824	(803) 637-4035
20	11	Fairfield County Health Department 1136 Kincaid Bridge Rd. Winnsboro, SC 29180	(803) 635-6481
21	11	Florence County Health Department 145 E. Cheves St. Florence, SC 29506	(843) 661-4828

COUNTY	CLINIC	WIC SITE/ADDRESS	TELEPHONE
21	13	Lake City Health Department 137 North Acline St. Lake City, SC 29560	(843) 394-8822
22	01	Georgetown County Health Department 531 Lafayette St. Georgetown, SC 29440	(843) 527-1013
23 23	01 10	Greenville Health Department 200 University Ridge Greenville, SC 29601	(864) 372-3219
23	11	Greer Health Department 200 Victoria St. Greer, SC 29651	(864) 848-5360
23	15	Greenville Memorial Hospital 1120 Grove Rd. Greenville, SC 29605	(864) 455-8835
23	17	Slater/Marietta Health Department Foothill Family Resources 3 Main St. Slater, SC 29683	(864) 836-6364
23	18	Simpsonville Center for Community Svcs 1102 Howard Dr Simpsonville, SC 29681	(864) 688-2221 (864) 688-2213
24	01	Greenwood County Health Department 1736 South Main St. Greenwood, SC 29646	(864) 942-3600
25	01	Hampton Health Department PO Box 37 531 Carolina Ave. Hampton, SC 29924	(843) 943-3878 Ext: 202
26	03	Conway Health Department 1931 Industrial Park Road Conway, SC 29569	(843) 915-8800
26	05	Loris Health Department James P. Stevens Complex 3811 Walnut St. Loris, SC 29569	(843) 756-4027
26	07	Myrtle Beach Health Department 700 21 st Ave. North Myrtle Beach, SC 29577	(843) 448-8407
26	08	Stephen's Crossroad Health Department Ralph H. Ellis Bldg. 107 hwy 57 north Little River, SC 29566	(843) 915-5654
26	17	South Strand (Surfside) Health Department 9630 Scipio Lane Myrtle Beach, SC 29588	(843) 205-8932

COUNTY	CLINIC	WIC SITE/ADDRESS	TELEPHONE
28	02	Kershaw County Health Department 1116 Church St. PO Box 340 Camden, SC 29020	(803) 425-6012
29	01	Lancaster County Health Department 1833 Pageland Hwy. PO Box 817 Lancaster, SC 29721	(803) 286-9948
30	01	Laurens County Health Department PO Box 447 93 Human Services Rd. Clinton, SC 29325	(864) 833-0000
31	03	Lee County Health Department 810 Brown St. Bishopville, SC 29010	(803)-484-6612
32	06	Batesburg-Leesville Clinic 229 West Church St. Batesburg, SC 29006	(803) 332-6326 Auto Voice System
32	08	Lexington County Health Department 1070-B S Lake Drive Lexington, SC 29073	(803) 785-6550
33	14	Marion County Health Department 206 Airport Court Suite B Mullins, SC 29574	(843) 423-8295
34	17	Marlboro County Health Department 711 Parsonage St. Ext. Bennettsville, SC 29512	(843) 479-6801 (843) 479-6803
35	01	McCormick County Health Department PO Box 27 204 Hwy 28 McCormick, SC 29835	(864) 852-2511
36	10	Newberry County Health Department 2111 Wilson Rd. Newberry, SC 29108	(803) 321-2170
37	23	Seneca Health Department 609 North Townville Street Seneca, SC 29678	(864) 882-2245
38	01	Orangeburg County Health Department PO Box 1126 / 1550 Carolina Avenue Orangeburg, SC 29116	(803) 536-9060
38	05	Holly Hill Health Center PO Box 1250-932 Holly St. Holly Hill, SC 29059	(803) 496-3324
39	01	Pickens County Health Department 200 McDaniel Ave. Pickens, SC 29671	(864) 898-5965

COUNTY	CLINIC	WIC SITE/ADDRESS	TELEPHONE
40	01	Richland Community Public Health Center 120 Clarkson St. Eastover, SC	(803) 353-0177
40	02	Richland County Health Department 2000 Hampton St. Columbia, SC 29204	(803) 576-1350 (803) 576-2940
40	03	Eau Claire Pediatric Clinic 4801 Monticello Road Columbia, SC 29203	(803) 376-1779
40	04	Fort Jackson Clinic 4556 Scales Ave. FT. Jackson, SC 29206	(803) 751-5281
41	01	Saluda County Health Department 613 Newberry Hwy. Saluda, SC 29138	(864) 445-7779
42	01	Spartanburg County Health Department 151 E. Wood St. PO Box 4217 Spartanburg, SC 29305	(864) 596-3305
42	03	Cowpens Public Health Department 112 Foster Street Cowpens, SC 29330	(864) 463-3940
42	04	Inman Health Department 6 S. Howard Street Inman, SC 29349	(864) 472-3393
42	06	Chesnee Health Department 210 Hampton St. Chesnee, SC 29323	(864) 461-2808
42	08	Woodruff Health Department 240 Gregory St. Woodruff, SC 29388	(864) 476-3817
43	04	Sumter County Health Department 105 N. Magnolia Street PO Box 1628 Sumter, SC 2915	(803) 773-5511
43	06	Shaw AFB WIC Office 524 Stuart St. Shaw AFB, SC 29152	(803) 895-4913
44	01	Union County Health Department 115 Thomas St. Union, SC 29379	(864) 429-1695
45	09	Williamsburg County Health Department 520 Thurgood Marshall Blvd. Suite A Kingstree, SC 29556	(843) 355-6012

COUNTY	CLINIC	WIC SITE/ADDRESS	TELEPHONE
46	01	York County Health Department 1070-B Heckle Blvd. PO Box 3057 CRS Rock Hill, SC 29732	(803) 909-7350
46	02	York Health Center 116 North Congress St. PO Box 149 York, SC 29745	(803) 684-7004
49	01	Port Royal Medical Center 1320 Ribaut Rd. Port Royal, SC 29935	(843) 322-1846
49	02	US Naval Hospital 5648 N. Okatie Hwy. 170 PO Box 357 Ridgeland, SC 29936	(843) 228-5561 (843) 228-5118
49	05	Chelsea Medical Center 5648 N. Okatie Hwy.170 PO Box 357 Ridgeland, SC 29936	(843) 987-7401 (843) 987-7471

List of Infant Formula Manufacturers, Wholesalers, Distributors, and Retailers

Each State WIC Program is required to maintain a list of infant formula wholesalers, distributors, or retailers licensed in the State in accordance with State law and infant formula manufacturers registered with FDA that provide infant formula.

Manufacturers list on next page.

INFANT MANUFACTURERS

<p><u>Abbott Laboratories</u> Abbott Nutrition 3300 Stelzer Road Columbus, Ohio 43219-7677</p>	<p><u>Mead Johnson</u> Mead Johnson Nutritional 2400 West Lloyd Expressway Evansville, IN 47721-0001</p>	<p><u>Nestle USA</u> Nestle Infant Nutrition 12 Vreeland Road, Box 697 Florham Park, NJ 07932-0697</p>
<p><u>Nutricia North America</u> Nutricia North America 9900 Belward Camput Drive, Ste 100 Rockville, MD 20850</p>	<p><u>PBM Nutritionals</u> PBM Nutritionals, LLC P.O. Box 2109 147 Industrial Park Road Georgia, Vermont 05468-2109</p>	<p><u>PBM Corporate Offices</u> 204 North Main Street Gordonsville, VA 22942</p>

WHOLESALE AND DISTRIBUTORS

<p><u>W. Lee Flowers (Floco)</u> P.O. Box 1629 Lake City, SC 29560 127 East W. Lee Flowers Road Scranton, SC 29591</p>	<p><u>Cash & Carry Wholesale</u> 1421 Five Chop Road Orangeburg, SC 29115 2440 Broad Street Sumter, SC 29150 3236 Augusta Road St 40B West Columbia, SC 29170 1620 South DeKalb Street Shelby, NC 28150</p>	<p><u>H.T. Hackney Company</u> 502 S. Gay Street Knoxville, TN 37902 209 Flintlake Road Columbia, SC 29223 333 Dreher Road Columbia, SC 29169 109 Sulphur Springs Road Greenville, SC 29617</p>
<p><u>J.T. Davenport & Sons, Inc.</u> 1144 Broadway Road Sanford, NC 27332 P.O. Box 1105 Sanford, NC 27331</p>	<p><u>Nash Finch Company</u> 121 Cold Storage Road P.O. Box 1709 Lumberton, NC 28358 12319 Hwy 301 South Statesboro, GA 30458 P.O. Box 490 Statesboro, GA 30459</p>	<p>368 Millennium Drive Orangeburg, SC 29115 2112 West Jody Road Florence, SC 29501 148 Industrial Drive Greenwood, SC 29646 2071 Wilson Road Newberry, SC 29108 1299 Flint Sheet Ext. Rock Hill, SC 29730</p>
<p><u>Supervalu, Inc.</u> 605 Selig Drive Anniston, AL 36201 PO Box 430 Anniston, AL 36202</p>	<p><u>Atlantic Dominion</u> <u>Distributors</u> 3641 Legion Road P.O. Box 406 Hope Mills, NC 28348</p>	
<p><u>C & S Wholesale Services, Inc.</u> 208 Bi-Lo Blvd Greenville, SC 29607</p>	<p><u>Cardinal Health, LLC</u> 4 Girbaud Court Greensboro, NC 27407</p>	

VENDOR MONITORING

Under Federal WIC Regulations, State WIC Programs are required to conduct monitoring of all vendors approved for participation in the WIC Program. The monitoring includes routine visits, follow-up visits, compliance buys and inventory audits.

All WIC Vendor responsibilities are administered at the State WIC office.

ROUTINE VISITS - Each year the WIC Program monitors WIC vendors every eighteen (18) to twenty-four (24) months to ensure compliance with program requirements.

The following information explains the process for vendor monitoring. During a routine visit, a WIC staff member will:

1. Enter the store and identify himself/herself to a member of management at the time of the visit.
2. Review all WIC checks available in the store, check stock of WIC foods and formula for quantity, quality and price.
3. Review invoices to ensure that formula was purchased from an approved wholesaler, distributor and or manufacturer.
4. Observe a WIC participant redeeming a WIC check, if possible, or ask a cashier to explain the procedures for accepting WIC checks.
5. Determine if violations have occurred. If violations are found, the WIC staff person will:
 - a. Discuss the violations with the person in charge;
 - b. Apply the appropriate number of violation points;
 - c. Explain what needs to be done to correct problem areas/violations;
 - d. Explain how long the store has to correct problems;
 - e. Explain what actions will be taken against the store if the needed corrective actions are not taken within the required time period.
6. Send a letter following the review restating the results of the monitoring visit along with a copy of the Vendor Summary Review which list the violation, corrective action and the timeframe for the follow-up visit, if needed.

FOLLOW-UP VISITS - If problems are identified during the routine visits, a follow-up visit will be scheduled within two (2) weeks. This visit allows the program to:

1. Determine if problems cited have been corrected;
2. Assist the vendor with more information or training;
3. Review the vendor requirements according to the WIC Agreement.

COMPLIANCE BUY VISITS - Each year a random sample of all active vendors is selected for routine compliance buys. If there is a strong indication that a store is in violation of program regulations, a compliance buy may be conducted. During these visits, a WIC staff member visits the store posing as a WIC participant, redeem one or more WIC check(s), and document what actions employees took during the transaction. The WIC Vendor Management Unit will notify the vendor in writing of the results of the compliance buy initial incidence of a violation for which a pattern must be established prior to documenting subsequent violations, unless the WIC Vendor Management Unit determines that notifying the vendor would compromise an investigation.

INVENTORY AUDITS - If it is determined that notifying the vendor would compromise and investigation; our office will conduct an inventory audit. During these visits, two (2) WIC staff members will visit your store to review inventory of specific WIC supplemental foods over a selected period of time. A member of management and both WIC staff members will verify and sign the inventory count. The vendor will be required to submit invoices for specific WIC approved items when requested.

VENDOR TRAINING

A series of vendor training sessions are conducted annually by the Vendor staff and held in multiple locations across the state (including two centralized sessions). These training sessions cover all policies and procedures and provide an opportunity for questions / answers and discussion of problems. Each authorized vendor must have at least one representative attend the annual training.

PROGRAM VIOLATIONS

Each violation of a program regulation has a set point value and a specific time period during which the points will remain on a vendor's record. If a vendor accumulates fifteen (15) or more violation points, the store will be disqualified from the program. The period of disqualification is determined by the nature of the violation(s), the number of violations and past disqualifications. Disqualification periods range from a minimum of one (1) year to permanent.

When a store accumulates fifteen (15) or more violation points, the vendor receives a disqualification letter giving a minimum of fifteen (15) days advance notice of the beginning date of the disqualification. With this notice, the vendor also receives information concerning the procedures for requesting a fair hearing. During the disqualification period, the vendor is not to

redeem WIC checks. Disqualification from the WIC Program may result in disqualification as a retailer in SNAP. Such disqualifications may not be subject to administrative or judicial review under SNAP.

Following is a list of possible WIC Program violations which includes their point values and retention periods:

Violations list on next page.

VIOLATIONS	POINT VALUE	POINTS RETAINED FOR
Failure to properly redeem WIC checks including but not limited to: not asking for ID cards, not properly completing date and purchase amount on WIC checks prior to obtaining participant's signature.	5.0	1 year
Not marking WIC items with price labels or shelf tags.	5.0	1 year
Stocking WIC approved Foods outside of the manufactures' expiration date. <ul style="list-style-type: none"> • More than 3 containers of a particular food item (Ex: 3 cans formula, 3 boxes of same cereal, etc.) 	5.0	1 year
Allowing substitutions for items listed on WIC checks.	5.0	1 year
Failure to submit WIC Vendor Price Survey as requested.	5.0	1 year
Failure to stock required quantity and/or variety of foods as listed in Agreement. <ul style="list-style-type: none"> • 1-3 items • 4-8 items • More than 8 items 	5.0 8.0 10.0	1 year
Where no specific brand is prescribed, requiring a participant to purchase a specific brand of WIC approved foods when more than one brand is available.	5.0	1 year
Using a WIC stamp other than the one issued by the agency (DHEC).	5.0	1 year
Collecting sales tax on WIC purchases.	5.0	1 year
Providing (sell/give) incentive items to participants.	5.0	1 year
Not providing infant formula invoices from an approved wholesaler, distributor, or retailer.	5.0	1 year
Threatening or abusing either verbally or physically, a WIC participant or WIC personnel in the conduct of official WIC business.	8.0	18 months
Not providing promotional specials or not accepting cents-off coupons or store discount cards to reduce WIC price.	8.0	18 months
Issuing Rain Checks.	8.0	18 months
Requiring WIC participants to use special check-out lanes. Not showing WIC participants the same courtesies as other customers. Committing acts of discrimination.	8.0	18 months
Knowingly entering false information on WIC check (s).	8.0	18 months
Requiring cash purchase to redeem WIC checks.	8.0	18 months
Contacting WIC participants in an attempt to recoup funds for WIC checks not paid by the Agency.	8.0	18 months

MANDATORY VENDOR SANCTIONS

Permanent Disqualification

The State agency must permanently disqualify a vendor for the following:

- (1) A conviction of trafficking WIC checks or selling firearms, ammunition, explosives, or controlled substances in exchange for WIC checks. A vendor is not entitled to receive any compensation for revenues lost as a result of such violation.

Six-year Disqualification

The WIC Program must disqualify a vendor for six (6) years for:

- (1) One incidence of buying or selling WIC checks for cash (trafficking);
- (2) One incidence of selling firearms, ammunition, explosives, or controlled substances as defined in 21 U.S.C. 802, in exchange for WIC checks.

Three-year Disqualification

The WIC Program must disqualify a vendor for three (3) years for:

- (1) One incidence of the sale of alcohol or alcoholic beverages or tobacco products in exchange for WIC checks;
- (2) A pattern of claiming reimbursement for the sale of an amount of a specific supplemental food item which exceeds the store's documented inventory of that supplemental food item for a specific period of time;
- (3) A pattern of vendor overcharges;
- (4) A pattern of receiving, transacting and/or redeeming WIC checks outside of authorized channels, including the use of an unauthorized vendor and/or an unauthorized person;
- (5) A pattern of charging for supplemental food not received by the participant;
- (6) A pattern of providing credit or non-food items, other than alcohol, alcoholic beverages, tobacco products, cash, firearms, ammunition, explosives, or controlled substances as defined in 21 U.S.C. 802, in exchange for WIC checks.

One-year Disqualification

The WIC Program must disqualify a vendor for one (1) year for:

- (1) A pattern of providing unauthorized food items in exchange for WIC checks, including charging for supplemental foods provided in excess of those listed on the WIC check;

- (2) A pattern of charging prices for WIC items above the maximum allowable price for the same type store within the same geographical area;
- (3) Intentionally providing incorrect quantity or type of infant formula specified on WIC check;
- (4) Intentionally providing false information on the WIC Vendor Application;
- (5) Intentionally providing false information on the Vendor Price Survey;
- (6) Non-payment of claim for overcharges to WIC Program;
- (7) Failure to allow monitoring of store by WIC Investigator; failure to provide WIC checks for review when requested;
- (8) Forging signatures on WIC checks;
- (9) Failure to submit a WIC Vendor Price Survey after the second request;
- (10) Failure to attend WIC Annual Vendor Training.

Effective Date of Disqualification of Vendors

The WIC Program must make permanent disqualifications effective on the date of receipt of the notice of the adverse action. The WIC Program must make all other disqualifications effective no earlier than 15 days after the date of the notice of the adverse action and no later than 90 days after the date of the notice of adverse action.

Second Mandatory Sanction

When a vendor, who previously has been assessed a sanction for any of the violations listed in this section, receives another sanction for any of these violations, the WIC Program must double the second sanction.

Third or Subsequent Mandatory Sanction

When a vendor, who previously has been assessed two or more sanctions for any of the violations listed in this section, receives another sanction for any of these violations, the WIC Program must double the third sanction and all subsequent sanctions.

SNAP Disqualification

Disqualification from the WIC Program may result in disqualification as a retailer in SNAP. Such disqualification may not be subject to administrative or judicial review under SNAP.

The WIC Program must disqualify a vendor who has been disqualified from SNAP. The disqualification must be for the same length of time as the SNAP disqualification, may begin at a later date than the SNAP disqualification, and is not subject to administrative or judicial review under the WIC Program.

VENDOR CLAIMS

When the State agency determines the vendor has committed a vendor violation that affects the payment to the vendor (overcharge), the WIC Program will establish a claim. The WIC Program will establish a claim in the amount that exceeds the maximum allowable price of each WIC check that contained the vendor overcharge or other error. The vendor must pay any claim assessed by the WIC Program.

A vendor overcharge means intentionally or unintentionally charging the WIC Program more for authorized supplemental foods than is permitted.

WIC LOGO USAGE

WIC vendors are not permitted to use either the acronym “WIC” or the WIC logo, including close facsimiles, in total or part, either in the official name in which the business is registered or in the name under which it does business, if different. WIC vendors are also not permitted to use either the acronym “WIC” or the WIC logo in advertising or promotional literature nor are vendors allowed to apply stickers, tags or labels having the WIC acronym or logo on WIC approved foods. Both the acronym and logo are registered with the U.S. Patent and Trademark Office.

The State Office will allow shelf stickers and shelf talkers if proper approval is granted by the State office. If a vendor would like to request state issued self stickers, contact the Vendor Management Unit.

VENDOR APPEALS

Vendors or vendor applicants can appeal certain actions taken by the State agency. For those actions that may be appealed, the State agency will notify the vendor or vendor applicant of the appropriate procedures and requirements to file an appeal.

FAIR HEARING INFORMATION

If the State agency has taken an adverse action against your store, you may request a fair hearing.

IT IS YOUR RIGHT TO APPEAL A DECISION OF THE STATE AGENCY WHEN:

1. Your application for participation as a WIC vendor has been denied;
2. You are disqualified from participation as a WIC vendor;

3. Your agreement with the WIC Program is not renewed;
4. Any adverse action that affects your participation in the WIC Program.

Below are the steps to take to request an appeal:

(Step 1)

- The vendor must provide the State agency (WIC Vendor Management Unit) with a written request for a fair hearing within fifteen (15) days of the receipt of the notice of the adverse action.
- The written request must list the actions with which the vendor disagrees as well as reasons the vendor disagrees with these actions.
- If the vendor does not request a hearing within the 15-day notification period, the State agency's decision becomes final.

(Step 2)

- The State agency will contact the vendor within fourteen (14) days of receipt of the fair hearing request to conduct a preliminary conference.
- The conference will be used in an attempt to resolve the complaint and to explain WIC policies and procedures.
- If resolved, the matter is documented by a follow-up letter to the vendor.
- If the matter cannot be resolved and the vendor wishes to continue with the request for a hearing, the State agency will continue with the fair hearing process.
- Appealing an action does not relieve the vendor from the responsibility of continued compliance with the terms of any written agreement with the State agency.

(Step 3)

- If the vendor is not satisfied with the outcome of the preliminary conference, the vendor may submit a request for final review to the S.C. Department of Health and Environmental Control's Clerk of the Board within 15 days after the conference.
- The WIC Program will provide additional information regarding the Board review process following the preliminary conference.

COMPLAINT PROCESS

The South Carolina Department of Health and USDA take all complaints seriously and encourage the immediate reporting of any alleged WIC Program abuse, violation, or fraud.

All complaints made against a vendor must be documented using a WIC Complaint/Follow-up Form “DHEC 1898” or reported verbally to the WIC Vendor Unit at (1-800-922-4406). If WIC Program violations are noted, at a minimum, the WIC vendor will be contacted stating details of the complaints, regulations or policies violated and the sanction (if applicable) that could be assessed. Individual making complaints may choose not to give their names. All documentation concerning complaints against vendors will be retained in the South Carolina WIC Vendor Unit for three (3) years.

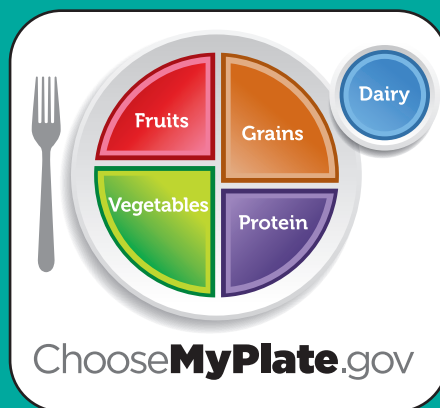
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If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usdagov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish).

USDA is an equal opportunity provider and employer.

If you have any questions concerning this manual, the vendor agreement or any other part of the WIC Program, please write to:

**WIC-Vendor Management Unit
SC Dept. of Health and Environmental Control
Box 101106
Columbia, SC 29211
Or call, toll-free: 1-800-922-4406
www.scdhec.gov/wic**



www.scdhec.gov/wic

Division of WIC Services • Bureau of Maternal and Child Health Services
PO Box 101106, Columbia, SC 29211, 800.922.4406